

Naloxone Distribution and Saturation Plan

Data Sources and Saturation Estimates

Arkansas has set the goal of a naloxone present at 100% of witnessed overdoses. Arkansas' Naloxone Distribution and Saturation Plan is a hybrid model based on the methodologies of Bird et al. (2015)¹ and Irvine et al. (2022)² using EMS Naloxone administration and opioid-related death data from the Arkansas Department of Health to determine the saturation goal and rate of distribution by county. In 2022, Arkansas had the second highest opioid prescription rate in the country with 72.2 prescriptions per 100 persons. The national rate in 2022 was 46.8 per 100 persons. A hybrid model using EMS Naloxone administrations was therefore used to include opioid-related misuse that did not result in death.

Estimated Supply Gap

Of the 75 counties in Arkansas, 61 have reached 100% saturation. The remaining 14 are all within a saturation range of 50-99%. OSAMH will use coalition partnerships to identify the needs and mitigate barriers to reach underserved populations, including mothers and pregnant women, rural populations, justice-involved populations, and other minorities.

Communication Plan

Stakeholder Group	Communication Method	Frequency	Message	Responsible Party
Community Health Workers, Hospitals, and Treatment Providers	Training Sessions, Email, Flyers	Monthly	Importance of naloxone, how to administer it, and resources for obtaining it	OSAMH, ORN, Sub-grantees
Local Nonprofits including AA, NA, and RCOs	Meetings, Email, Social Media	Bi-Weekly	Partnership opportunities, naloxone training sessions, and distribution events	Program Director
Faith-based Organizations	Workshops, Newsletters, Sermons	Monthly	Addressing opioid crisis, naloxone availability, and reducing stigma	Community Outreach Coordinator
Courts, jails, and law enforcement	Training Sessions, Email, Flyers	Monthly	Naloxone distribution and Increased risk of overdose upon re-entry,	OSAMH, ORN, Sub-grantees
Homeless Shelters and Transitional Living Housing	In-person visits, Posters, Pamphlets	Weekly	Information on naloxone, how to use it, and where to get it for free	Outreach Workers, PRSS
Youth Centers, Schools, and Universities	Emails, School Assemblies, Newsletters	Monthly	Educating on opioid risks, naloxone training, and distribution locations	School Health Coordinators
Local Media (Radio, TV)	Public Service Announcements, Interviews	Bi-Monthly	Raising awareness about the opioid crisis, naloxone availability, and events	Communications Team
General Public	Social Media, Community Events, Flyers	Ongoing	Information on opioid risks, naloxone training, and free distribution points	Public Health Campaign Team

¹ Bird SM, Parmar MK, & Strang J (2015). Take-home naloxone to prevent fatalities from opiate-overdose: protocol for Scotland's public health policy evaluation, and a new measure to assess impact. *Drugs: education, prevention and policy*, 22, 66–76.

² Irvine, M. A., Oller, D., Boggis, J., Bishop, B., Coombs, D., Wheeler, E., ... & Green, T. C. (2022). Estimating naloxone need in the USA across fentanyl, heroin, and prescription opioid epidemics: a modelling study. *The Lancet Public Health*, 7(3), e210-e218.

Targeted Distribution Strategy

Arkansas's distribution plan for SOR IV will continue efforts to reach saturation and utilize GIS heat map analysis to identify overdose hotspots by county. The implementation phase of the plan will first prioritize reaching the 14 undersaturated counties and then concentrate on specific areas of need. OSAMH will partner with an outside vendor to supply, train, market, and plan distribution in collaboration with the prevention provider network. Naloxone will be available through vetted local access points across the thirteen designated prevention regions. An outside vendor will review, monitor, and refill supplies as needed. An outside vendor will manage individual requests through mail order services and distribute naloxone directly to individuals at high risk, focusing on small orders reaching rural areas. OSAMH will produce, standardize, and update comprehensive training for individuals and organizations on how to administer naloxone effectively, utilizing peer-to-peer health educator programs when possible.

Partnerships

OSAMH will collaborate with the Arkansas Department of Health, the Arkansas Opioid Recovery Partnership which is the non-profit organization managing the pharmaceutical settlement dollars, and the Arkansas Department of Higher Education, which manages Act 811 compliance in colleges and universities, to streamline and avoid duplication of efforts.

OSAMH will coordinate to increase Naloxone access to its prevention, treatment and recovery providers to support distribution across the continuum of care. OSAMH will collaborate with community entities including, but not limited to, recovery groups, faith-based organizations, military support organizations, and nationally recognized groups specializing in the best practices of saving and protecting lives.

Budget

The estimated budget will be \$250,000 of the SOR grant, which will go towards Naloxone procurement, distribution including transportation and storage, and program operational costs. The operational costs will include funds for training, outreach, and data analysis. Current bulk pricing for a two-dose kit of Naloxone is approximately \$33.

Timeline

Assessment (Months 1-3)	Implementation (Months 4-12)	Evaluation (Duration)
<ul style="list-style-type: none">Conduct data analysis and update saturation map.Assess current naloxone supply and identify gaps.Establish coalition/advisory committee partnerships.	<ul style="list-style-type: none">Launch targeted distribution efforts in high-risk areas.Roll out communication campaigns.Provide training sessions for naloxone administration.	<ul style="list-style-type: none">Monitor naloxone saturation levels and administrations.Adjust strategies based on feedback and data analysis.Prepare a final report with recommendations for future efforts.
<ul style="list-style-type: none">Responsible Staff - OSAMH	<ul style="list-style-type: none">Responsible Staff – OSAMH & Sub-grantees	<ul style="list-style-type: none">Responsible Staff – OSAMH & Sub-grantees